



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 7622

Bib Data Sheet

SERIAL NUMBER 09/719,347	FILING DATE 12/08/2000 RULE	CLASS 725	GROUP ART UNIT 2611	ATTORNEY DOCKET NO. 11345-018001
-----------------------------	-----------------------------------	--------------	------------------------	-------------------------------------

APPLICANTS

Christophe Declerck, Senantes, FRANCE;

**** CONTINUING DATA *******

This application is a 371 of PCT/IB99/01164 06/08/1999

CL

**** FOREIGN APPLICATIONS *******

EUROPEAN PATENT OFFICE (EPO) 98401374.8 06/08/1998

CL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/16/2001

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING 7	TOTAL CLAIMS 40	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>C. Chamberlain</i> Examiner's Signature	Initials			

ADDRESS

22511
 OSHA & MAY L.L.P.
 1221 MCKINNEY STREET
 HOUSTON , TX
 77010

TITLE

Decoder for, and method of, processing a transport packet stream

FILING FEE RECEIVED 1300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
--------------------------------	---	---

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 719347 RECEIPT DATE: 12 / 08 / 00
IA NUMBER: PCT/ IB99 / 01164 IA FILING DATE: 06 / 08 / 99
FAMILY NAME: DECLERCK DELAY WAIVED (Y/N): Y
GIVEN NAME: CHRISTOPHE DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 06 / 08 / 98
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: 11345.018001 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 7132288600
FAX

NAME: JONATHAN P OSHA
ROSENTHAL & OSHA
STREET: 700 LOUISIANA STREET SUITE 4550

CITY: HOUSTON
STATE/COUNTRY: TX ZIP: 77002

EMAIL:

APPLICATION TITLES:
DECODER FOR, AND METHOD OF, PROCESSING A TRANSPORT PACKET STREAM

TAB TO LAST POSITION, PUSH SEND